POSITION	INITIALS	ID NO.	DATE
	SF		10-02-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	Dn	32	10/9
FORMALITY REVIEW	MM	572	11-16-01
RESPONSE FORMALITY REVIEW	MH	830	02-20-02

INDEX OF CLAIMS

✔ .... Rejected	N	.... Non-elected
= .... Allowed	I	.... Interference
— (Through numeral)... Canceled	A	.... Appeal
÷ .... Restricted	O	.... Objected

Final	Original	Date								Final	Original	Date								Final	Original	Date							
①	1	1-8/03									51											101								
2	2										52											102								
3	3										53											103								
4	4										54											104								
5	5										55											105								
6	6										56											106								
7	7										57											107								
8	8										58											108								
9	9										59											109								
10	10										60											110								
11	11										61											111								
12	12										62											112								
⑬	13										63											113								
⑭	14										64											114								
15	15										65											115								
16	16										66											116								
17	17										67											117								
18	18										68											118								
⑲	19										69											119								
20	20										70											120								
21	21										71											121								
㉒	22										72											122								
23	23										73											123								
24	24										74											124								
25	25										75											125								
26	26										76											126								
27	27										77											127								
㉘	28										78											128								
㉙	29										79											129								
㉚	30 ÷										80											130								
31	31										81											131								
32	32										82											132								
33	33										83											133								
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46	46										96											146								
47	47										97											147								
48	48										98											148								
49	49										99											149								
50	50										100											150								

If more than 150 claims or 10 actions
staple additional sheet here

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